PTO/SB/18 (08/00)

Approved for use through 10/31/2002. OMB 0651-0032

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## REISSUE PATENT APPLICATION TRANSMITTAL

ADDRESS TO:	Attomey Docket No		051919-1041						
	First Named Inve	entor	Richard E. Shelton						
Assistant Commissioner for Patents	Original Patent N		5,208,907						
Box: Reissue	Original Patent I (Month/Day/Yea		May 4, 1993						
Washington, D.C. 20231	Express Mail La		EL789318661US						
	Patent	Design Patent	☐ Plant Patent						
APPLICATION ELEMENTS (37 CFR 1.173)  ACCOMPANYING APPLICATION PARTS									
Fee Transmittal Form (e.g. PTO/SB/56)     (Submit an original, and a duplicate for fee present the state of the present that the present that the present the present the present that the present the pre		10. Statement of status and support for all changes							
2. Applicant claims small entity status See 37 CFR 1.27		11.	Original U.S Patent for surrender						
3. Specification and Claims in double column of	opy of patent		Ribboned Onginal Patent Grant Statement of Loss (PTO/SB/55)						
4. Drawing(s) (proposed amendments, if approp	priate)	12.	Foreign Priority Claim (36 USC 119) (if applicable)						
5. Reissue Oath/Declaration (original or copy)		13.	Information Disclosure Copies of IDS Statement IDS (PTO-1449) Cutations						
6. Power of Attorney		14.	English Translation of Reissue Oath/Declaration (if applicable)						
7. Original U.S. Patent Currently assigned? (If Yes, check applicable box(es))	Yes 🗌 No		Preliminary Amendment						
Written Consent of all Assignees (PTO/SB/5	3)	15.							
37 CFR §3.73(b) Statement (PTO/SB/96)		16.	Return Receipt Postcard (MPEP 503) (Should be specifically itemized)						
8. CD-ROM or CD-R in duplicate, Comp (Appendix) or large table.	uter Program	17	Other						
Nucleotide and/or Amino Acid Sequence Sul (if applicable, all o the following are necessar									
a.									
c. Statements verifying identify of above c	opies.								
18	. CORRESPO	NDENCE ADDR	ESS						
Customer Number or Bar Code Label  (Insert Gustomer No. or Alfach Bez code label here)  Or Correspondence address below									
NAME Scott A. Horstemeyer									
Thomas, Kayden, Horstemeyer & Risley, L.L.P.  ADDRESS 100 Galleria Parkway Suite 1750									
CITY Atlanta S	TATE Georg		ZIP CODE 30339-5948						
COUNTRY U.S.A. TELEPHONE 770-933-9500 FAX 770-951-0933									
Name (Print/Type) Scott A. Horstemeyer Registration No. (Attorney/Agent) 34,183									
Signature Cott Outliness Date (0/09/01									

Burden Hour Statement: This form is estimated to take 0.2 hours to complete. Time will vary depending upon the needs of the individual case. Any comments on the amount of time you are required to complete this form should be sent to the Chief Information Officer, Patent and Trademark Office Washington, DC 20231. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Assistant Commissioner for Patents, Box Reissue, Washington, DC 20231.

PTO/SB/56 (002/01)
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4.75 M

REISSUE	APPLICATION	ON FEE		DOCKET Number (Optional) 51919-1041								
Claims as Filed – Part 1												
Claims in Patent	atent		Number Filed	(3)	Small Entity		Othe	Other than a Small Entity				
			in Reissue Application	Number Extra	Rate	Fee		Rate	Fee			
(A)	Total claims (37 CFR 1.16			**** 0 =	x \$18.00	0	or	×\$				
(C)	Independent ( (37 CFR 1.15	Claims	(D) 2	* 0 =	x \$84.00	0		x\$				
Basic Fee (37 CFR 1.16(h)) \$740.00									\$			
Total Filing Fee \$740.00								OR	\$			
Claims as Amended – Part 2												
	(1) Claims Remaining	Claims		(3) Number Extra	Small Entity Entity			Other than a Small				
	After Amendment		Previously Paid For	Present	Rate	Fee		Rate	Fee			
Total Claims (37 CFR 1.16(j)	*** 131	Minus	** 20	* 111 =	x \$18.00	1998.00	or	x\$				
Independent Claims (37 CFR	*** 7	Minus	***** 3	4 =	x \$84.00	336.00		x\$				
teritoris				Total A	dditional Fee	\$2234		OR	\$			
If the entry in (D) is less than the entry in (C(, Write ")" in column 3.  If the "Highest Number of Total Claims Previously Paid for" is less than 20, Write 20 in this space.  After any cancellation of claims.  If "A" is greater than 20, use (B-A); if "A" is 20 or less, then (B-20).  "Highest Number of Independent claims Previously Paid for" or Number of Independent Claims in Patent (C).  Applicant claims small entity status. See 37 CFR 1.27.  Please charge Deposit Account No. in the amount of \$ . A duplicate of this sheet is enclosed.  The Commissioner is hereby authorized to charge any additional fees under 37 CFR 1.16 or 1.17 which may be required, or credit any overpayment to Deposit Account No. 20-0778. A duplicate copy of this sheet is enclosed.  A check in the amount of \$ to cover the filing/additional fee is enclosed.  Payment by credit card in the amount of 3,074.00. Form PTO-2038 is attached												
WARNING: Information on this form may become public. Credit Card information should not be included on this form. Provide credit card information and authorization on PTO-2028.												
Date:	Date: Signature of Applicant, Attorney of Agent of Record:											
	Typed Name: Scott A. Horstemeyer, Registration No. 34,183											

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## **PATENTS**

## IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

In re: Shelton et al.

Serial No.:

Examiner:

Group No.:

Filing Date:

For: Method For Generating a Display Utilizing Objects in an Object List

## CERTIFICATE OF EXPRESS MAIL

**Assistant Commissioner for Patents** 

BOX:

Washington, D.C. 20231

Sir:

Enclosed for filing in the above case are the following documents:

Return Postcard

Reissue Patent Application Transmittal (1 pg.)

Fee Transmittal Page (1 pg.)

Specification & Claims & Drawings in Single Column Format (24 Pgs.) Copy of Issued Patent No. 5,208,907

Reissue Application Declaration by the Assignee (4 Pgs.) Reissue Application by Assignee, Offer to Surrender (2 Pgs.)
Assent by Assignee for Filing of Reissue Application
Certificate Under 37 CFR 3.73(b) Establishing

Right of Assignee to Take Action Amendment for Reissue Application Information Disclosure Statement

Form PTO-1449

Prior Art Documents (50 documents) Credit Card Payment form for \$3074.00

Further, the Commissioner is authorized to charge Deposit Account No. 20-0778 for any additional fees required. The Commissioner is requested to credit any excess fee paid to Deposit Account No. 20-0778.

Respectfully submitted.

Scott A. Horstemeyer; Reg. No. 34,183

THOMAS! KAYDEN, HØRSTEMEYER & RISLEY, L.L.P.

100 Galleria Parkway, N.W.

**Suite 1750** 

Our Docket No.: 51919-1041

Atlanta, Georgia 30339-5948

I hereby certify that all correspondences listed above are being deposited for delivery to the above addressee, with the United States Postal Service "EXPRESS MAIL POST OFFICE TO ADDRESSEE" service under 37 CFR §1.10 on the date indicated below:

The envelope has been given U.S. Postal Service "Express Mail Post Office To

Addressee" Package # EL789318661US.

Date:

Julie Campbell